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22908 7590 06/15/2005

BANNER & WITCOFF, LTD.
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<u>Dian Preston</u>	(Depositor's name)
<u>Dian Preston</u>	(Signature)
<u>9/13/05</u>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/806,983	03/23/2004	Javier Bajor	005222.00210	2279

TITLE OF INVENTION: COMPUTER ENABLED TRAINING OF A USER TO VALIDATE ASSUMPTIONS

APPL. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	09/15/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHRISTMAN, KATHLEEN M	3713	434-323000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Indeliq, Inc.

Chicago, IL

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Kenneth F. Smolik

Date

Typed or printed name

Kenneth F. SmolikRegistration No. 44,344

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TOTAL NO. OF PAGES: (including cover sheet)

4

YOUR REFERENCE NO.:

10/806,983

OUR REFERENCE (C/M) NO.:

005222.00210

RE:

In re: Appln. of Javier Bajer

Appln. No. 10/806,983

Filed: March 23, 2004

For: Computer Enabled Training of a User to Validate Assumptions

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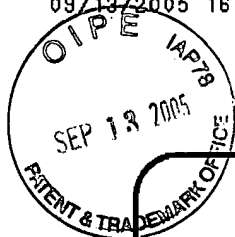
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/806,983
		Filing Date	03/23/2004
		First Named Inventor	Javier Bajer
		Art Unit	2279
		Examiner Name	Christman, Kathleen M.
Total Number of Pages in This Submission	4	Attorney Docket Number	05222-00210

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTOL-85; Fax Cover Sheet
Remarks A duplicate of the Part-B-Fee Transmittal is enclosed. The Commissioner is authorized to debit or credit any overpayment or deficiency from our Deposit Account No. 19-0733.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	Banner & Witcoff, LTD.		
Signature	<i>Kenneth F. Smolik</i>		
Printed Name	Kenneth F. Smolik		
Date	09/13/2005	Reg. No.	44,344

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Signature	<i>Diana Preston</i>		
Typed or printed name	Diana Preston	Date	9.13.05

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